

Innovating for Maternal and Child Health in Africa (IMCHA)

IMCHA External Final Evaluation Donor partners' management response and action plan

This document presents the management response of the Innovating for Maternal and Child Health in Africa (IMCHA) Initiative donor partners, and related action plan, to the independent external final evaluation of the initiative. The evaluation [report](#) and two issue briefs focusing on [gender integration](#) and [knowledge translation and policy/practice influence](#) are also available.

IMCHA is a joint initiative funded by the Canadian Institutes of Health Research (CIHR), Global Affairs Canada (GAC), and Canada's International Development Research Centre (IDRC). It was launched in January 2014. The eight-year, \$36 million initiative aims to improve maternal, newborn and child health (MNCH). It funds a total of 19 Research Teams implementing 28 projects in 11 countries in East and West Africa supported by two regional Health Policy and Research Organizations (HPROs). The West African HPRO is the West African Health Organization (WAHO), while in East Africa, the HPRO is a consortium led by the African Population Health Research Center (APHRC).

A final evaluation took place between October 2019 and September 2020 to assess the overall performance of the initiative and the value-added of its design and delivery. The terms of reference and workplan of the evaluation were developed and greenlighted collaboratively with all the donor partners, and the consulting group "hera" was selected through a competitive process. The evaluation addressed ten evaluation questions grouped under four themes: 1) Achievements of IMCHA with regard to its Performance Measurement Framework (PMF) and policy uptake, 2) Initiative management, 3) Operationalisation, and 4) Documentation of the results and impacts. IMCHA donor partners have taken advantage of multiple opportunities to inform, question, and support the external evaluation team. At the same time, concrete and robust steps have ensured absolute independence of the evaluation process and result.

The methodology of the evaluation included document reviews, on-line survey of current and former members of IMCHA research teams and key informant interviews with IMCHA stakeholders during visits to IMCHA countries in Africa and in Canada, and through remote interviews using a voice over internet protocol. IMCHA donor partners are satisfied with the overall evaluation methodology, results and recommendations. They consider that the evaluation meets the conditions for acceptable quality and accept the final report of the final evaluation submitted by hera.

IMCHA donor partners acknowledge that the final evaluation is helpful for understanding and documenting IMCHA's achievements and lessons learned, as well as for informing future undertakings. They agree with the evaluators' conclusion that IMCHA is a relevant investment for the Government of Canada, and that "the partnership between GAC, CIHR and IDRC allowed the three institutions to go above and beyond what they would be able to achieve on their own, while bringing a unique asset to Canadian researchers and the international research community" (Vol 1, p. iii). The report also highlights how the IMCHA model contributed to enhanced partnership and collaboration between researchers and decisionmakers, and points to successes in terms of improved MNCH in targeted communities.

The evaluation concluded with eight recommendations focussing on documenting uptake for evidence during the remainder of IMCHA and on possible refinements in the design and development of a future initiative. We detail our response to each recommendation, in turn, below.

Recommendation for the remainder of IMCHA:

Recommendation 1: *Global experience and knowledge about the approach of embedding decisionmakers in implementation research is limited. IMCHA can potentially make an important contribution to this knowledgebase. At a time when IMCHA projects have completed their knowledge translation activities and generated a sufficient volume of publications to document them, a meta-analysis of the approach should be commissioned and published.*

Management Response: IMCHA donor partners agree with this recommendation.

Action plan: The IMCHA team at IDRC, thereafter called IMCHA Management team, recognizes that a meta-analysis would be an important addition, but note that this will not be feasible during the time remaining under IMCHA. However, other options could be explored for the available time, and as an achievable alternative, the IMCHA Management team is collaborating with the African Journal of Reproductive Health, Africa's leading indigenous journal in reproductive health, to produce a Special Edition featuring the work from IMCHA grantees. This Special Edition will contribute to documenting the effectiveness and impact of the IMCHA model in increasing uptake of research evidence into policy and practice to improve women's and children's health in Africa and other regions. Research teams and HPROs were invited to contribute to this peer-reviewed publication, independent of the IMCHA Management team. Example of requests for contribution included reflections on how involving a decision-maker in the core research team may have helped this process. This supplement is expected to be published in June 2021.

Recommendations for future initiatives:

Recommendation 2: *The PMF for a future initiative should be more clearly linked to the objectives of implementation research. Improved maternal and child health and increased utilisation of quality health services are high level outcomes and therefore appropriate ultimate outcomes for a logic model. However, as stated in the IMCHA logic model, many factors contribute to these outcomes and it is therefore not appropriate to include them in the PMF. The PMF of an implementation research initiative should instead be used to monitor the extent to which funded projects are able to document or reject the effectiveness and feasibility of researched interventions in the implementation context, and the extent to which they are able to translate these findings into improvements in MNCH programmes and policies.*

Management Response: IMCHA donor partners agree with this recommendation.

Action plan: IMCHA donor partners will consider this recommendation in the development of a future PMF, while being aligned with the requirements of each donor partner.

Recommendation 3: *The design of a future initiative should be clear about the scale at which it expects policy and programme changes to be generated by its grantees. If national MNCH policies are the primary targets, project grants should be of sufficient size to assure national visibility. As an alternative, multiple networked projects could be selected within countries to generate a critical volume of evidence. Scaling to national policy does not necessarily have to be the objective of all projects. Applicants should, however, be clear about the level of scaling they are targeting, and most importantly, this should also be reflected in the administrative position of the decisionmaker Co-PI embedded in the project.*

Management Response: IMCHA donor partners agree with this recommendation.

Action plan: IMCHA donor partners will consider this recommendation in the development of a future initiative, including better clarifying expected level(s) of scaling.

Recommendation 4: *Programme objectives in terms of promoting gender equality and health equity should be clearly spelled out in the call for proposals and in the monitoring frameworks of each project. Funded projects should include methodologies and plans on how they intend to address these objectives. Prior to finalising the implementation plans, all selected applicants should participate in workshops and webinars where their capacity and their approach to meeting the objectives are clarified and steps are taken to address any capacity gaps.*

Management Response: IMCHA donor partners agree with this recommendation.

Action plan: IMCHA donor partners will consider this recommendation in the development of a future initiative. This includes better clarifying these concepts in future calls for proposals and in the evaluation criteria and monitoring frameworks of the projects. Supporting capacity development among the grantees from the onset and throughout the projects and embedding ways to monitor progress towards the objectives through the regular reporting process could also be envisioned.

Recommendation 5: *HPROs should be selected and contracted early in a new initiative and should participate in the selection of research grantees. If they have early knowledge about what will be funded in which country, they will be in a better situation to develop their own workplan for supporting projects in knowledge translation and networking.*

Management Response: IMCHA donor partners agree with this recommendation.

Action plan: IMCHA donor partners will consider this recommendation in the development of a future initiative, subject to best practices among donor partners.

Recommendation 6: *In the grant selection process, care should be taken to avoid funding opportunistic partnerships between Canadian and African research institutions and between African research institutions and decisionmakers that are solely formed in response to the proposal call. While new partnerships should not be excluded per se, they should be subjected to additional scrutiny to assure that partners have common objectives and compatible ways of working.*

Management Response: IMCHA donor partners agree with this recommendation.

Action plan: IMCHA donor partners will consider this recommendation in the development and strategy of a future initiative calls for proposals and selection process, as well as for projects monitoring. Nevertheless, we also note that the consultants do not categorically reject new partnerships, and neither would we. They clarify that “While new partnerships should not be excluded per se, they should be subjected to additional scrutiny to assure that partners have common objectives and compatible ways of working.” (Vol. 1, p. 45). Accordingly, our focus will lie on assessing each partnership’s strength and potential for research impact.

Recommendation 7: *The preparation phase of IMCHA prior to starting project activities was almost two years, considerably shortening the implementation time of projects. While this may be unavoidable, especially if capacity-building in gender and equity mainstreaming is included in the preparation phase of a new initiative, it should be factored into the overall duration of the initiative. Allocating additional time to the closing phase of projects for advocacy and knowledge translation activity may also be considered.*

Management Response: IMCHA donor partners agree with this recommendation.

Action plan: IMCHA donor partners will consider this recommendation in the design of a future initiative, in accordance with timeline and budget constraints.

Recommendation 8: *A future initiative should, from the start, create a strongly branded internet presence through a single web portal that is independent of the IDRC web site. Management of the site could be outsourced, even to an HPRO, but the source contract should assure that the initiative is presented comprehensively and that the site provides timely access to all communications.*

Management Response: IMCHA donor partners agree with this recommendation.

Action plan: The IMCHA Management team at IDRC has acted to ensure one website (out of the two currently available on IMCHA) has complete, up-to-date, translated and relevant information. The website (ea-imcha) hosted by the EA-HPRO will be the main site for anyone interested in IMCHA’s results, publications, news and legacy. This website is housed at the African Population and Health Research Center (APHRC) and will remain available beyond the end of the initiative. The IMCHA page, hosted on the IDRC website will also remain, but its location within the IDRC website may change and the content will no longer be updated after the end of the initiative. IDRC Communications will be in charge of managing this page as needed after July 2021.

In addition, IMCHA donor partners will consider this recommendation in the development of a future initiative, subject to agreement with donor partners.

Conclusion

IMCHA donor partners agree with the recommendations, which are already contributing to programming during the remainder of the IMCHA initiative. We thank the herera evaluation team for their outputs and contribution to dissemination of results. We valued their professionalism and enthusiasm in executing this summative evaluation.